IN THE UNITED STATES PATENT AND TRADEMARK OFFICE						
In re Patent Application of		BJS-1721-94				
	Dkt.	C#	M#			
FARDEAU et al.	C/A.U.	1651				
Serial No. 10/538,715	Examiner	: Kim				
Filed: June 10, 2005	Date	Januar	21, 2009			
Title: BACTERIAL STRAINS OF GENUS EXIGUOBACTERIUM, CULTURE METHOD AND USES						
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Sir:						
RESPONSE/AMENDMENT/LETTER This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.						
☐ Correspondence Address Indication Form Attached.						
Fees are attached as calculated below: Total effective claims after amendment previously paid for 20 (at least 20		highest x \$52.00		\$0.00 (1202)/\$0.00 (2202)	\$	
Independent claims after amendment previously paid for 3 (at least 3) =	<b>0</b> minus 0	highest x \$220.0		\$0.00 (1201)/\$0.00 (2201)	\$	
If proper multiple dependent claims now add	ed for first ti	me, (igno	re improper); ad	ld		
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)  Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)  One Month Extension \$130.00 (1251)\\$85.00 (2251)  Two Month Extensions \$490.00 (1255)\\$855.00 (2253)  Three Month Extensions \$1110.00 (1253\\$865.00 (2253)  Four Month Extensions \$1730.00 (1255\\$865.00 (2255)  Five Month Extensions \$2350.00 (1255\\$175.00 (2255)						130.00
Terminal disclaimer enclosed, add			\$140	.00 (1814)/ \$70.00 (2814)	\$	
☐ Applicant claims "small entity" status. ☐ Statement filed herewith						
Rule 56 Information Disclosure Statement Fi	ling Fee			\$180.00 (1806)	\$	0.00
Assignment Recording Fee				\$40.00 (8021)	\$	0.00
Other:					\$	0.00
CREDIT CARD PAYMENT FO				ALLY BY CREDIT CARD	\$	130.00
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.						
901 North Glebe Road, 11 <sup>th</sup> Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100	Ву	Atty: B.	NDERHYE P.C J. Sadoff, Reg. N	No. 36,663		
BJS:pp	Sig	nature:		/B. J. Sadoff/		